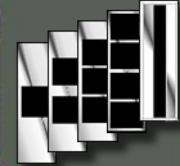
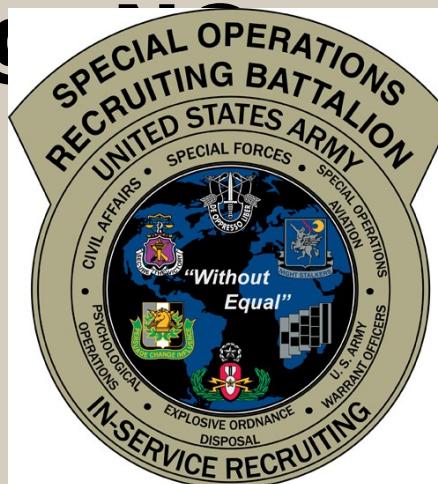




Warrant Officer Recruiting



Special Operations Recruiting Battalion



ARMY STRONG.



WARRANT OFFICER STRONG.



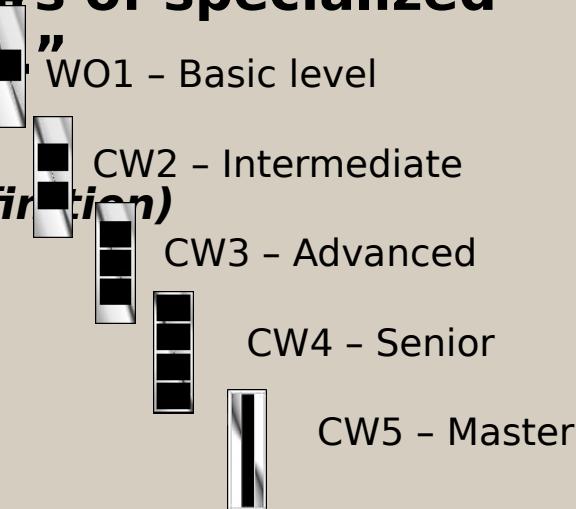
Definition of a Warrant Officer



“Warrant officers are highly specialized officers. They are self-aware and adaptive combat leaders, trainers, staff officers, and advisors. Warrant officers are competent and confident warriors, innovative integrators of emerging technologies, dynamic teachers, and developers of specialized

What is a Warrant Officer?

(new DA PAM 600-3 Defin

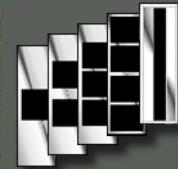


ARMY STRONG.

WARRANT OFFICER STRONG.



Briefing Agenda



Definition of a Warrant Officer

Warrant Officer Recruiting Mission

General Requirements

Who We are Looking For

Opportunities and Benefits

Application and Processing

Q & A



ARMY STRONG.

WARRANT OFFICER STRONG.



Warrant Officer Recruiting Mission



The United States Army Recruiting Command is charged with recruiting highly qualified applicants to serve as Army Warrant Officers.



ARMY STRONG.

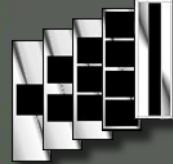


WARRANT OFFICER STRONG.



Administrative Requirements

1. **US Citizenship (No Waivers)**
2. **General Technical (GT) Score of 110 or higher (No Waivers)**
3. **High School Graduate or have a GED (No Waivers)**
4. **Eligible for a Secret Security Clearance (No Waivers)**
5. **Must Have \geq 12 Months Remaining on Enlistment Contract (No Waivers)**
6. **Pass Commissioning Physical for Tech or Flight Physical for Aviators.** (Waiver Avail.)
7. **Age: Technicians \leq 46 yrs / Aviators $<$ 33 yrs at time packet is boarded** (Waiver Avail.)
8. **Active Federal Service: <12 yrs at time packet is boarded** (Waiver Avail.)
9. **Pass the Standard 3-event Army Physical Fitness Test (APFT) and Meet Height/Weight Standards** (Only Available for Soldiers injured in Combat)



ARMY STRONG.

WARRANT OFFICER STRONG.



General Information



Technician

- 13 - Branches
 - 37 - MOSs
 - Usually SGT or higher
 - Most require ALC
 - ~~Must meet requirements listed on the MOS pages of our website:~~A photograph showing two soldiers in full military gear, including camouflage uniforms, berets, and sunglasses. They are standing side-by-side, looking upwards and to the left. The background is a plain, light-colored wall.



WWW.USAREC.ARMY.MIL/HQ/WARRANT



Aviator

- 1 - Branch
 - 1 - MOS (*To apply for*)
 - Any MOS/Rank can Apply
 - Qualifying SIFT Score
(40+)



ARMY STRONG.

WARRANT OFFICER STRONG.



Warrant Officer MOSS



WO MOS	MOS Description	Enlisted Feeder MOSSs
120A	Construction Engineering Tech	12K, H, P, R, Q, T, W
<u>125D</u>	<u>Geospatial Engineering Tech</u>	<u>12Y or 35F, 35G</u>
131A	Field Artillery Targeting Tech	11C, 13B, D, F, M, P, R, T, 19D
140A	Command and Control Systems Tech	14J & 14S
<u>140E</u>	<u>Air and Missile Defense Tactician/Tech</u>	<u>14E, T</u>
150A	Air Traffic Control	15Q
<u>150U</u>	<u>Tactical UAV Tech</u>	<u>15W, 15E</u>
151A	Aviation Maintenance Tech	All CMF 15 MOS (Excluding 15P &
15Q)		
153A	Rotary Wing Aviator	All MOSs (FY13 SIFT Test)
255N	Network Management Tech	All MOSs
255A	Information Systems Tech	All MOSs
290A	Electronic Warfare Tech	13C, D, E, R, 25C, E,
29E or 35F, N, P, S, T		
<u>350F</u>	<u>All Sources Intelligence Tech</u>	<u>35F</u>
<u>350G</u>	<u>Imagery Intelligence Tech</u>	<u>35G</u>
<u>351L</u>	<u>Counterintelligence Collections Tech</u>	<u>35L</u>
<u>351M</u>	<u>Human Intel Collection Tech</u>	<u>35M</u>
<u>352N</u>	<u>Traffic Analysis Tech</u>	<u>35N</u>

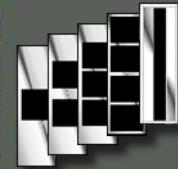


ARMY STRONG.

WARRANT OFFICER STRONG.



Warrant Officer MOSSs Cont.



WO MOS

WO MOS	MOS Description
<u>352S</u>	<u>Non Morse Intercept Tech</u>
<u>353T</u>	<u>Intel and Electronic Warfare Tech</u>
420A	Human Resources Tech
740A	CBRN Tech
880A	Marine Deck Officer
<u>881A BOARD)</u>	<u>Marine Engineer Officer</u>
<u>882A</u>	<u>Mobility Officer</u>
890A	Ammunition Technician
913A	Armament Systems Maint Tech
<u>914A</u>	<u>Allied Trades WO</u>
915A	Automotive Maint Tech
X, and Y	
919A	Engineer Equipment Maint Tech
920A	Property Accounting Tech
920B	Supply Systems Tech
921A	Airdrop Systems Tech
922A	Food Service Tech
923A	Petroleum Systems Tech
948B	Electronic Systems Maint Tech
25P, S	
948D	Electronic Missile Systems Maint Tech

35S

74D
88K

Enlisted Feeder MOSSs

35T
42A/42F

88L and 12P, w/ASI S2 (SEPT

All MOSSs

89B, 89D
91F, G, K (91A, D, M, P and 15J)
91W and 91E
91A, B, D, H, L, M, P, S, T, W,
91B, C, D, H, J, L, X
92Y, 68J
92A
92R
92G, 68M
92F,L,W
94D, E, F, H, K, L, R, V, W, Y, & Z; 29B,
94A, M, P, S, T, & Z

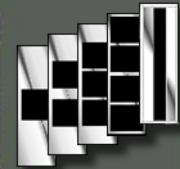


ARMY STRONG.

WARRANT OFFICER STRONG.



What We are Looking For...



Soldiers who are:



- **Leaders**
- **Self Confident**
- **Dependable**
- **Technically/Tactically Proficient**
- **Ethical and Moral**
- **Decision Makers**
- **Self-Sufficient**
- **Mature**
- **Able to Grasp Complex Problems**
- **Mentally and Physically Strong**



ARMY STRONG.



Opportunities and Benefits



- **Small Elite Corps**
 - Makes up 2% of the Army
and 15% Officer corps
- **Challenging Assignments**
- **Technical Training and Education**
- **Faster Promotion Potential**
- **Extended Career Path**
- **Perform Core Duties Longer**
- **Better Pay and Retirement**



ARMY STRONG.

WARRANT OFFICER STRONG.



Assignment Opportunities



White House Communications Agency

White House Fellowship Eligibility

Training-with-Industry (TWI)

(Motorola, General Dynamics, Microsoft, Apple)



Army Accessions Command
(TRADOC/USAREC)



Pentagon and Department of the Army

TAFT Assignments (Technical Assistance Field Team)

Australia, Egypt, UAE and other locations

WARRANT OFFICER STRONG.



ARMY STRONG.



Training and Education



- Maintain G.I. Bill benefits
 - Maintain tuition assistance
 - Maintain E-
- (TA) benefits
- Army U
 - Degree Completion Program

*Senior Service College Selection/Combined Advanced Civil
Schooling*

Army Logistics University, VA (TLog program)

Naval Post Graduate School, MD (XP Course cooperative)

Joint Military Intelligence College, DC

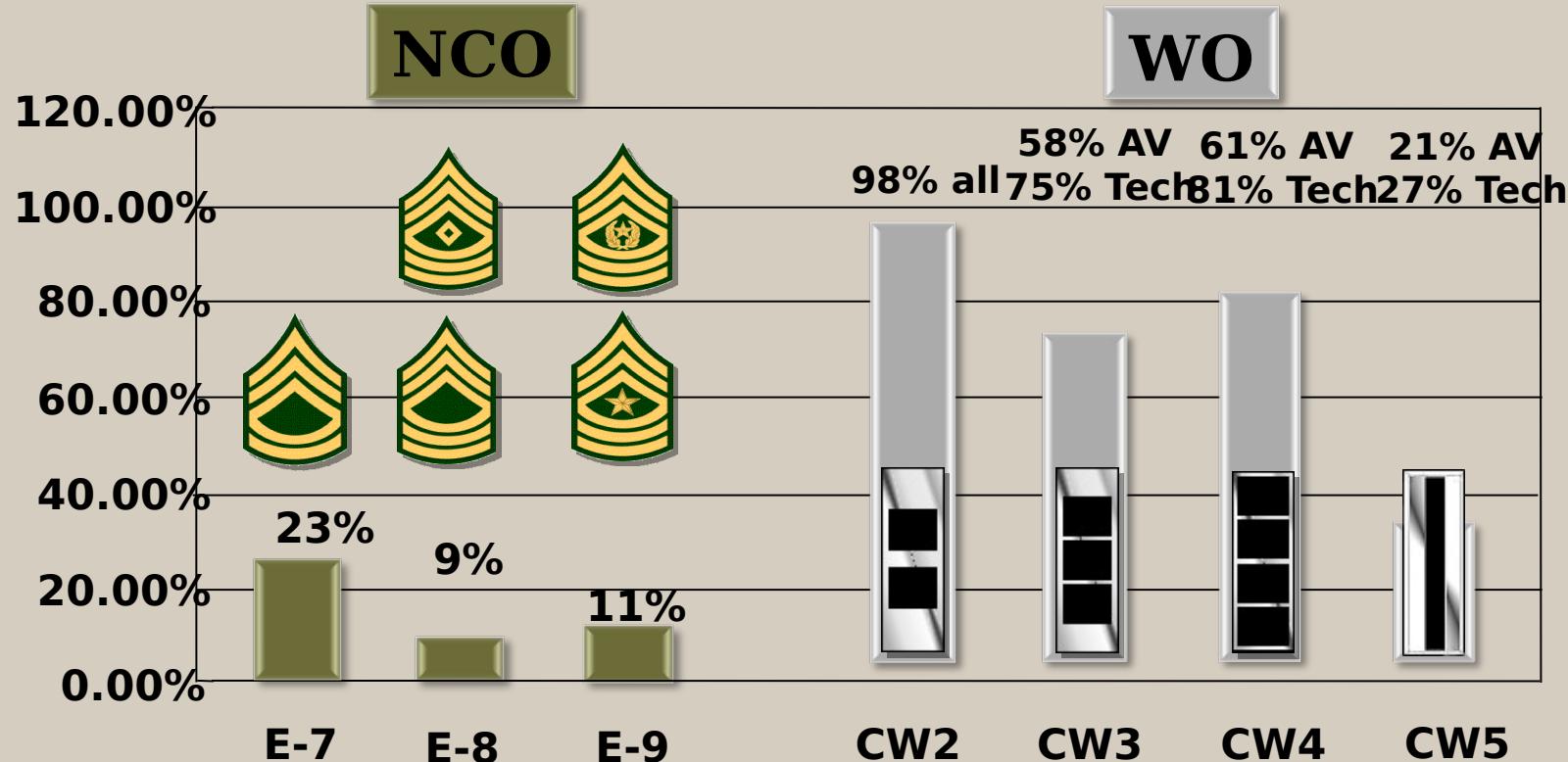
ARMED OFFICERS STRONG.



ARMY STRONG.



Promotion Comparison



ARMY STRONG.

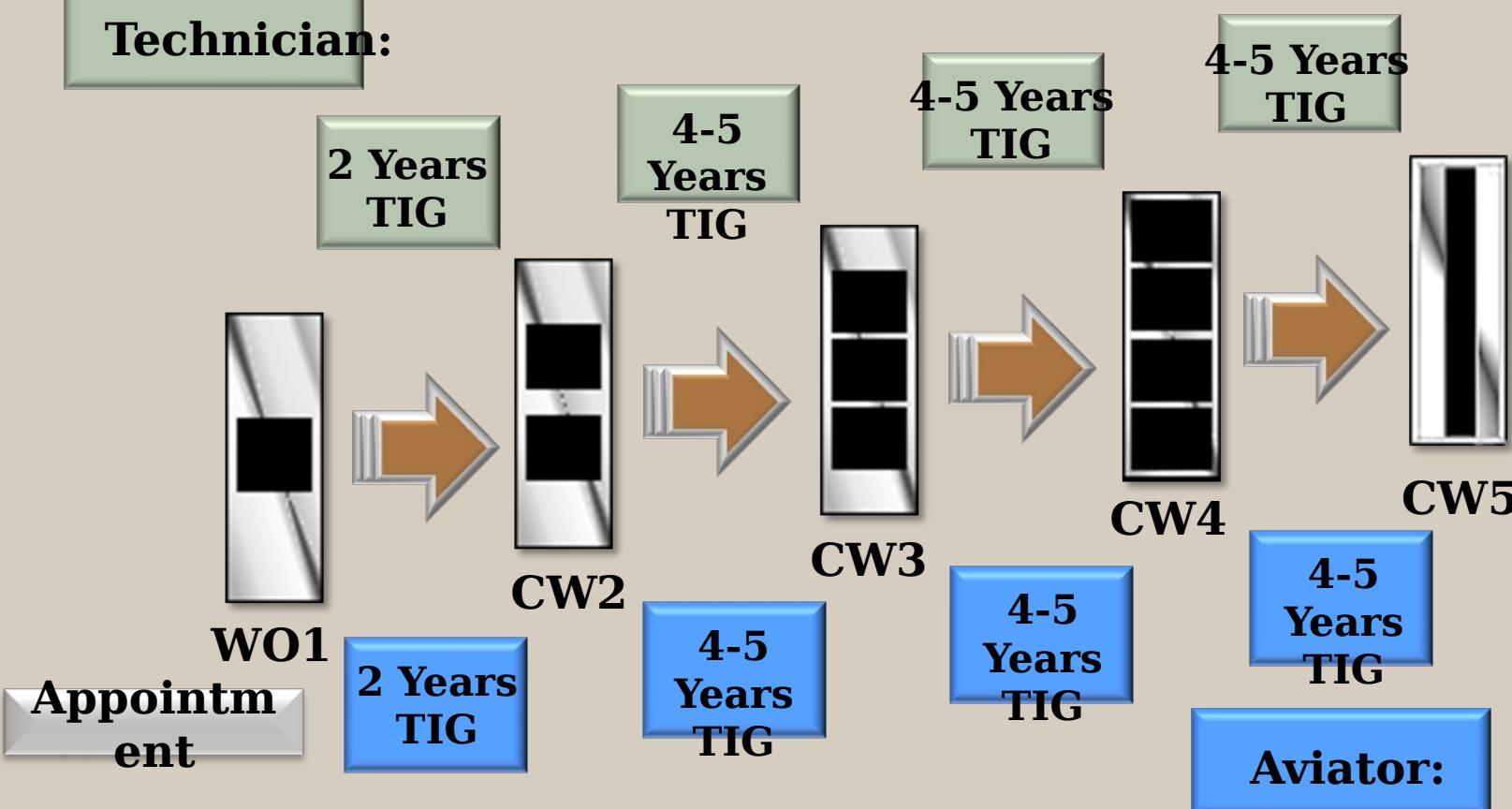
WARRANT OFFICER STRONG.



Warrant Officer Promotions



Technician:



WARRANT OFFICER STRONG.



ARMY STRONG.



Extended Career

ALARACT NOV 08

Total Years Active
Federal Service

30 + Years of WO
SVC *If Promotion

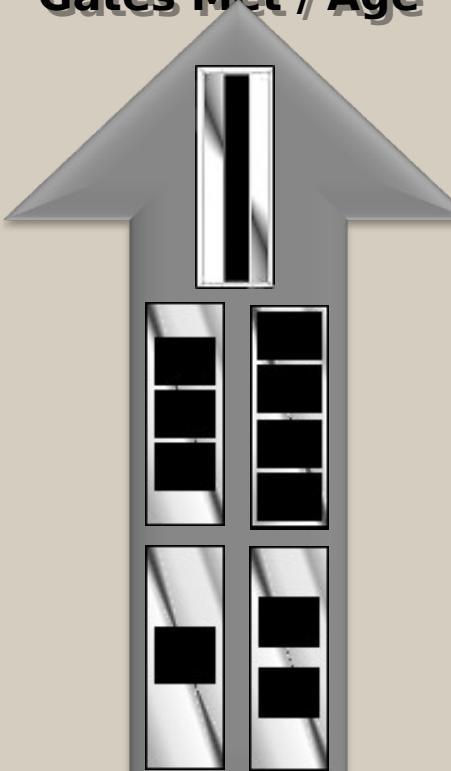
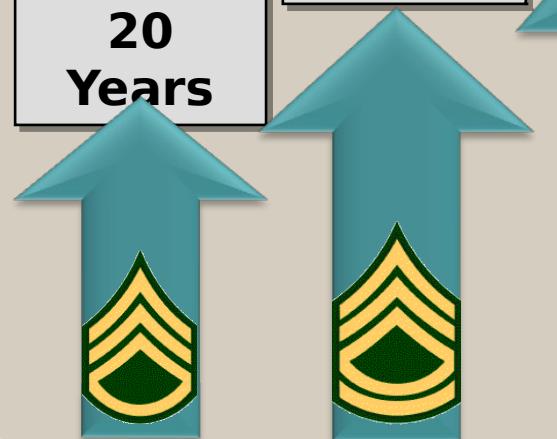
Gates Met / Age

26
Years

29
Years

32
Years

20
Years



WARRANT OFFICER STRONG.



ARMY STRONG.



Retirement Pay Comparison



CW3	20	\$2,888 (50%)	\$760
E-7/SFC	20	\$2,128 (50%)	
CW4	24	\$4,101 (60%)	\$1043
E-8/MSG	24	\$3,058 (60%)	
CW5	30	\$6,169 (75%)	
E-9/SGM	30	\$4,972 (75%)	\$1197

Based on January 2012 Pay Scale

Source- <http://www.dod.mil/cgi-bin/finalpayhigh3.pl>



ARMY STRONG.

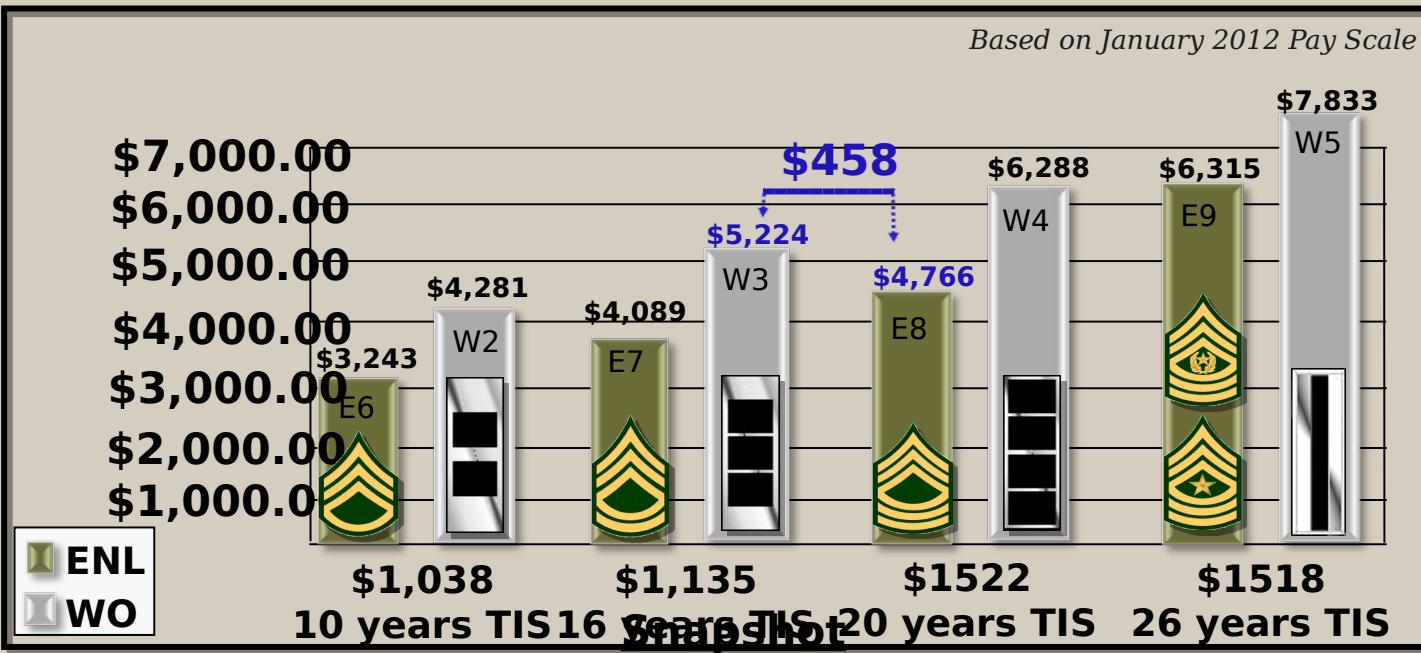
WARRANT OFFICER STRONG.



Base Pay Comparison



Based on January 2012 Pay Scale



**E-5 vs W1 at 6 years TIS = Approximate
\$849**

**E-6 vs W1 at 8 years TIS = Approximate
\$662**

**E-7 vs W1 at 10 years TIS = Approximate
\$332**



ARMY STRONG



Additional Benefits



Flight Pay

Years of Aviation Service	Monthly Rate
2 or less	\$125
Over 2	\$156
Over 3	\$188
Over 4	\$206
Over 6	\$650
Over 14	\$840

WARRANT OFFICER STRONG.

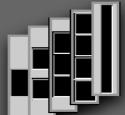


ARMY STRONG.



Where to Start...





UNITED STATES ARMY WARRANT OFFICER RECRUITING



[Home](#) [Applicant Information](#) [Selection Information](#) [Warrant Officer MOS](#) [Application Forms](#) [Briefing Schedule](#) [FAQ's](#) [Contact Us](#)

Popular

[!\[\]\(0e2d2c6dd57d59693160a7375112fcd8_img.jpg\) Find Us On facebook](#)

[Warrant Officer Recruiting Briefings in Your Area](#)

[Warrant Officer Selection Board Schedule](#)

[Warrant Officer Selection Board Results](#)

[Check Your Warrant Officer Application Status](#)

[Warrant Officer Application Checklist Download](#)

Warrant Officer MOS

[Warrant Officer MOS List](#)

[Enlisted MOS Conversion List \(Army\)](#)

[Enlisted MOS Conversion List \(Air Force\)](#)

[Enlisted MOS Conversion List \(Marine\)](#)

Meet The Challenge... Become An Expert In Your Field

Warrant Officer Branch Mission

The U.S. Army Recruiting Command is charged with recruiting highly qualified applicants to serve as Army Warrant Officers.

Warrant Officers are highly specialized experts and trainers in their career fields. By gaining progressive levels of expertise and leadership, these leaders provide valuable guidance to commanders and organizations in their specialty. Warrant Officers remain single-specialty Officers with career tracks that progress within their field, unlike their Commissioned Officer counterparts who focus on increased levels of command and staff duty positions.

Hot Topics

[News](#) [Application Processing](#) [Packet Submission Process](#) [Downloads](#)

Special Announcement 1 - The following MOSSs have been added to the September 2011 Board: 125D, 140E, 150A, 311A, 352P(Persian Farsi), 352S, 881A, 890A, 913A & 914A. Application deadline for packet submission for these MOSSs and these MOSSs only will be 1 August 2011.

Special Announcement 2 - MILPER Message # 11-156 - This MILPER Message establishes the CRIMINAL INVESTIGATOR WARRANT OFFICER CRITICAL SKILLS ACCESSION BONUS (CID CSAB) program from 20 MAY 2011 - 30 SEPTEMBER 2012.

APFT Waivers - The revised AR 350-1 is dated 18 Dec 09 with an effective date of 18 Jan 10 and is online. Paragraph 3-12, i(3) states:

"Qualified personnel in WOCC, CCC, and other standard APFT categories may be granted a waiver if they are unable to meet one or more of the physical standards due to a permanent physical disability or limitation resulting from a medical condition or injury."

www.usarec.army.mil/hq/warrant

WARRANT OFFICER STRONG.



ARMY STRONG.



FY14 WO Selection Board Schedule

Board Dates	Packet Deadline
18-22 Nov 13	20 Sep 13
13-17 Jan 14	15 Nov 13
10-14 Mar 14	17 Jan 14
12-16 May 14	14 Mar 14
14-18 Jul 14	16 May 14
15-19 Sep 14	18 Jul 14

MOS	Nov-13	Jan-14	Mar-14	May-14	Jul-14	Sep-14
120A		X			X	
125D		X			X	
131A	X		X		X	
140A	X		X		X	
140E	X		X		X	
150A	X		X		X	
150U		X		X		X
151A	X		X		X	
153A	X	X		X	X	
180A			X			X
255A		X		X		X
255N		X		X		X
290A	X		X			
311A		X		X	X	X
350F	X	X	X	X	X	
350G	X		X			
351L	X		X			
351M	X		X			
352N	X	X	X	X	X	
352S	X					
353T	X				X	
420A	X			X		X
420C	X					
740A	X					
880A	X			X		
881A	X			X		
882A	X					X
890A	X			X		
913A	X			X		
914A	X			X		
915A	X		X	X		X
919A	X			X		
920A	X		X			X
920B	X		X			X
921A	X		X			X
922A	X		X			X
923A	X		X			
948B		X			X	
948D		X			X	

WARRANT OFFICER STRONG.



ARMY STRONG.



Waiver Requests

WAIVER	APPROVAL AUTHORITY	TURN AROUND TIME	NOTES
AGE	DA G1	4–6 Weeks	1
AFS	DA G1	4–6 Weeks	1
APFT	DA G3	4–8 Weeks	1,2,3,4,5
Moral	HRC/DA G1	2–6 Weeks	1,6
Prerequisite	Proponent	2–4 Weeks	1
Medical	USAREC G3	2–4 Weeks	7

1. Example in Sample Application available at briefings or for download on our website.
2. DA Form 705 (APFT Score Card) must be included with application
3. BN CDR's LOR must state: "The applicant is physically capable of completing training and worldwide deployment"
4. Must have a Permanent Physical Profile
5. Permanent Physical Profile and physical must be dated within 12 Months
6. Can submit Waiver ahead of Application. (Instructions on website)
7. Waiver request NOT prepared by the applicant

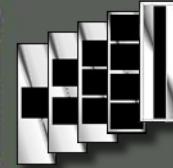


ARMY STRONG.

WARRANT OFFICER STRONG.



FY 13 AFS/Age/Moral Waivers by Branch



Branch	AFS (Submitted / Approved)	AFS Range for Approved Waivers	Age (Submitted / Approved)	Moral (Submitted / Approved)
AD	4/3	12-14 yrs		4/1
AG	11/9	12-14 yrs		4/3
AV	21/9	12-15 yrs	7/4	20/9
CM	22/5	12-14 yrs		4/1
EN	7/4	12-15 yrs	1/0	9/7
EW	10/8	12-16 yrs		4/2
FA	4/3	12-13 yrs		9/7
JA	0	N/A		2/2
MI	45/37	12-14 yrs	2/1	13/6
MP	6/6	12-14 yrs		3/3
OD	41/26	12-16 yrs		25/14
QM	30/16	12-13 yrs		6/3
SC	12/8	12-14 yrs		22/13
SF	16/15	12-18 yrs		6/5
TC	6/5	12-15 yrs		4/0



ARMY STRONG.

WARRANT OFFICER STRONG.



The Application

!!!Download from our Website!!!



Board Packet

Documents

1. MTO/PSB Letter or S-1
2. DA Form 61 (*HT/WT & APFT Statement*)
3. Letters of Recommendation
(Next Slide)
4. Resume
5. ERB (*Enlisted Record Brief*)
6. OMPF (**10 Years of NCOERs** and all AERS in order newest to oldest)
7. College Transcripts
8. DA Form 6256 (*AFAST Form from Test Center*) *This form is for MOS 153A only*
9. Official Photo

Supporting

10. Security Clearance (*Clearance Memo*)
11. USAREC Form 1932 (*Physical Cover Sheet*)
12. DA Form 160-R
13. Statement of Understanding
14. Waivers *(Next Slide)*
15. DA Form 705 (*APFT Score Card*)
16. DA Form 3349 (*Permanent Profile Sheet*)
17. Conditional Release
(Reserves & Other Services)



ARMY STRONG.

WARRANT OFFICER STRONG.



Front Cover / Instructions

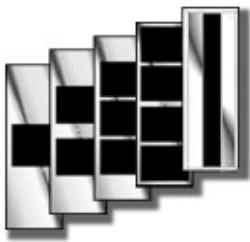


United States Army
Recruiting Command

ARMY STRONG.



US ARMY WARRANT OFFICER PROCUREMENT PROGRAM SAMPLE APPLICATION AND GUIDE



www.goarmy.com/warrant
December 2011

The information contained in this sample application changes frequently. For the most up-to-date information please visit our web-site at www.usarec.army.mil/warrant

STEPS FOR PREPARING A WARRANT OFFICER APPLICATION

Step 1: Visit the Warrant Officer (WO) recruiting web site at: <http://www.usarec.army.mil/warrant>. Start with the "Program Overview" and follow the instructions to download the forms for use with PrintEdge or Adobe Acrobat software.

Step 2: Review Army Regulation 135-100 and Department of the Army Pamphlet 631-6. (All Army publications mentioned throughout this guide are located on the warrant officer recruiting website at <http://www.usarec.army.mil/warrant>).

Step 3: Verify that you meet the following Administrative requirements:

- (a) US citizen;
- (b) General Technical (GT) score of 110 or higher (DAO service applicants must convert their GT scores – see web site);
- (c) Be at least 18 years of age;
- (d) Secret security clearance (interior secret is acceptable to apply – DAW AR 300-87 & AR 105-100);
- (e) Pass the standard 3-event Army Physical Fitness Test (APFT) and meet height/weight standards (DAW FM 21-20 & AR 600-9);
- (f) Pass the appointment physical Technicians or the Class 1A flight physical for Aviators (DAW AR 40-501);
- (g) Minimum of 12 months or more remaining on current service contract as of board convene date.

Step 4: Ensure you meet the **MINIMUM** prerequisites listed on our web site for your requested WO Military Occupational Specialty (WOMOS). If you do not, you must either wait until you meet all the prerequisites or request a percentile waiver. Prerequisites for 153A - Aviator: Open to any rank, and MOS (other than AFSC 1E08), must be less than 33 years of age by the board convene date, score 90 or higher on the AFATF, and pass a Class 1A flight physical. Ground Aviators may be considered for the WO Program if they have less than 33 years of age and 4-6 years experience in the field for which applying (see web site), and be less than 44 years of age by the board convene date.

Step 5: It is recommended that you keep all original documents, including the physical, for reference. Packets can be submitted by Digital Gender or in PDF format as an email attachment (see step 12). DA photos may be sent in PDF, TIF or JPEG format; color photos present the best image of applicants. Deployed personnel may take a digital photo in duty uniform standing at the position of attention with a neutral background (no scenery, helmets or weapons).

Step 6: Take the complete packet to your Personnel Services Detachment (PSD), Military Personnel Division (MPD) or S-1 office for review. Have it NCO or CNO endorse your checklist stating you are not barred, flagged or pending UCMJ action. Non-Army personnel can skip this step and submit their application as indicated in step 12.

Step 7: Once at USAREC, the packet will be logged in to the computer, and then forwarded for completeness. You will be notified of any discrepancies by phone or email using the contact information in Boxes 17 & 19 of your DA Form 61. (Ensure the email address on your DA Form 61 is correct that you check daily.) Verify your status online before continuing recruitment.

Step 8: Technician packets are forwarded to their Branch WO program for technical evaluation. Aviator applications are evaluated at USAREC unless a waiver is required. Prepositioned qualified applications are considered "board-ready" if no waivers are needed. The applicant will be notified if not qualified by the program if waivers are disapproved. Please allow 4-6 weeks for processing of waivers.

Step 9: Applications requiring a waiver (Block 20 of the DA Form 61 is answered YES) are forwarded to the Army Reserve Personnel Command (AR-PERSCOM), St Louis, MO by USAREC. Please allow 4-6 weeks for processing waivers.

Step 10: Applications requiring an Active Federal Service (AFS) waiver ("an age waiver") are forwarded to the Deputy Chief of Staff for Personnel (DCSPER) in HQDA. Please allow 4-6 weeks for processing waivers. AFIS Waiver Aviator applicants who are 33 or older by the convene date of the board, or Technical WO MOS applicants who are 44 or older by the convene date of the board.

Step 11: Association boards are held bi-monthly at USAREC starting in November, but not all MOSs are considered at each board. The board vote results in one of the following designations: Selected, Qualified - Select (Q-S) (You have been selected and will attend WOCS in approximately 4-6 months); Fully Qualified - Non-selected (FD-QS) (You have not been selected and will be considered by one more board automatically); It is highly recommended to make and print out the DA Form 61 so you can improve your packet at this point. If you are not selected, you can reapply to the next cycle. Note: Current MOS applicants are not considered competitive with the current packet provided. Applicants twice non-selected for the WO Program must wait a year to reapply. Applicants may reapply immediately with an approved wait period exception request - available on our website. Please see the web site for process to reapply.

Step 12: Visit our web site at least monthly for new or updated information and for board results (normally published the week following a board). Packet submission deadlines are posted on our website along with the board schedules. Packets should be sent via PDF email attachment. Size or less in size per e-mail. Number multiple e-mailing applicants concurrently: 1 of 4, 2 of 4, etc. Send all documents to HQN, USAREC Board Branch as follows:

- a. Send NEW packets in PDF format to: [NewWarrantPackets@usarec.army.mil](mailto>NewWarrantPackets@usarec.army.mil)
- b. Send UPDATES to packets already accepted and on file to: [NewWarrantUpdates@usarec.army.mil](mailto>NewWarrantUpdates@usarec.army.mil)
- c. Send CORRECTIONS to "R" status packets to: [NewWarrantCorrections@usarec.army.mil](mailto>NewWarrantCorrections@usarec.army.mil)
- d. ONLY deployed personnel may mail their packet to the address below however, electronic submission is preferred.
COMWRC/RCB-A
ATTN: RCB-A
1337 3RD AVE
FT KNOX, KY 40121-2729



ARMY STRONG.

WARRANT OFFICER STRONG.



Checklist / DA Form 61



Warrant Officer Application Checklist

All documents should be single-sided copies and in the following order:

- Name: _____
- Board Packet** (These copies should be clean and neat in appearance—they will make up your board packet being reviewed for your selection):
- DA Form 61 (with HT/W/T and APFT statement, signed as shown on the web site example)
 - Senior Warrant Officer Letter (Optional for some WOMOS)
 - Company Commander Letter of recommendation (or applicable Company Grade UCMJ authority)
 - Battalion Commander Letter of recommendation (or applicable Field Grade UCMJ authority)
 - Resume (USAEC Form 1935)
 - ERB or equivalent document (used to verify DOB, GT, AFS, and ETS)
 - Evaluations (All NCOERs up to ten years worth) and all AERs(1059s) in order newest to oldest)
 - College Transcript(s)
 - COPIES of Professional Certificates (Licenses or Certificates issued to Engineers, Mechanics etc...)
 - AFAST Results (153A applicants only)
 - DA Photo

Supporting Documents: (These documents are required to qualify your packet, but will not be reviewed by the board)

- Security Clearance verification memorandum (Prepared by S2 or facility security manager)
 - Physical Clearance (USAEC Form 1932 (Aviation) – expires after 18 months, all others expire at 24 months. If waiver or exception to policy required, applicant needs to include complete physical. 153A applicants need To include DD 2808 with Stamp from USAAMC, Ft. Rucker)
 - DA Form 160-R (ensure that you sign it and block 9a is checked)
 - Remaining Hard Copy documents from OMPP not included on your ERB (awards, certificates)
 - Re-enlistment documents - if required (ERB does not show 12 months remaining on current contract)
 - Statement of understanding - (a copy of this memo is on the web site)
 - Conditional Release - if required (if you are not an active duty Army applicant)
 - English credit document - if required (250N, 251A, 254A, 420A, 920A, 920B, 921A, 922A, 923A)
 - TABE score document - if required (880A, 881A)
 - Body Fat Content Worksheet - if required (If you do not meet height/weight standards set in AR 600-9)
 - Moral waiver request - if required (as identified in blocks 26 on DA Form 61)
 - Age waiver request - if required (max age is 33 for aviators, 46 for all others)
 - Prerequisite waiver request - if required (verify with MOS on web site)
 - AFS waiver request - if required (12 years for all MOS)
- Ac 11 Warner request - if required (must include Physician's home, complete Physical, and Ac 11 Score card with packet)
- Entire Packet administratively reviewed by any Warrant Officer.

REVIEWER (printed name and title): _____ SIGNATURE: _____

NOTE: ONLY deployed personnel may mail their completed application. Electronic submission is preferred:
HEADQUARTERS US ARMY RECRUITING COMMAND
ATTN RCRO-SM-A
1301 THIRD AVENUE
FORT KNOX KY 40121-2725

This section to be completed and authenticated by PSD/MPD personnel or the Battalion S-1/S-1 NCO
I certify that service member is not flagged and is eligible to apply for this program.

CERTIFYING OFFICIAL (printed name and title): _____
SIGNATURE: _____ DATE: _____
DSN PHONE #: _____ COMM PHONE #: _____
EMAIL: _____

Applicants must send their packets as a PDF attachment via e-mail or by use of the Digital Sender, (file size restricted to 5mb or less per transmission) to NewWarrantPackets@usarec.army.mil

*Deployed personnel may mail their application however, electronic submission is preferred.

*Please, only use one method of delivery and do not split packets between different means unless asked by a recruiter to do so. Check your application status on-line at www.usarec.army.mil/hq/warrant after allowing 5 – 10 business days for processing. Good luck!

APPLICATION FOR APPOINTMENT										
For use of this form, see AR 135-100, AR 135-1, AR 231-5, and AR 601-100; the proponent agency is DCOPR										
DATA REQUIRED BY THE PRIVACY ACT OF 1974										
AUTHORITY: Title 10 United States Code, Section 2012 (Title 5 United States Code, Section 552a)										
PRINCIPAL PURPOSE: To obtain an appointment as a commissioned or warrant officer in the Regular Army or Army Reserve, or to obtain selection to attend the US Army Officer Candidate School.										
ROUTINE USES: Basic for determination of qualifications and background information for eligibility for consideration for appointment as a Regular Army or Army Reserve commissioned or warrant officer or for selection for attendance at the US Army Officer Candidate School.										
DISCLOSURE: Disclosure of information requested in DA Form 61 is voluntary. Failure to provide the required information will result in non-acceptability of the application.										
1. TYPE OF APPOINTMENT FOR WHICH APPLICATION IS SUBMITTED					2. GOVERNING REGULATION OR CIRCULAR (Specify appropriate section(s) if applicable)					
COMMISSIONED OFFICER - REGULAR ARMY					AR 135-100					
COMMISSIONED OFFICER - ARMY RESERVE					3. GRADE FOR WHICH APPLYING (Specify assignments only) WO1					
					4. SOURCE OF APPOINTMENT (ROTC only)					
					DRAFT DESIGNATED					
<input checked="" type="checkbox"/> WARRANT OFFICER - ARMY RESERVE ** ALL applicants must select this block**					SCHOLARSHIP ENTER 1, 2, 3 OR 4 YEARS:					
5. ONLY FOR APPLICANTS FOR APPOINTMENT AS WARRANT OFFICERS										
6. BRANCH AND SPECIALTY PREFERENCES										
Regular Army and Officer Candidate applicants and all ROTC graduates: In numerical sequence, indicate 10 branch preferences other than CA and DS.										
USAR applicants: If applying for a specific Reserve vacancy, indicate ONLY the branch of the vacant position; all other applicants may enter more than one branch.										
6. MOS CODE					7. MOS TITLE					
351L Counterintelligence Technician										
					If qualified, may list up to 3 MOSs. List MOSs in order of preference. Listing more than 1 MOS requires extra processing time because proponents must review.					
PREFERENCE	BRANCH	SPECIALTY	7. NAME (Last, first, middle/initial variations from birth certificate in Item 4f)	8. GRADE	9. SOCIAL SECURITY NUMBER					
			WHO You Are	E-6	000-00-0000					
			10. BRANCH (MOS 351L only)	11. TOTAL YRS ACTIVE SERVICE	12. MARITAL STATUS	M	13. NUMBER OF DEPENDENTS UNDER 18 YEARS OF AGE			
	AD		14. DATE OF BIRTH	15. PLACE OF BIRTH (City, county, state, zip code)	16. SEX		17. COMPLETE MILITARY ADDRESS (If presently on active duty) (Include ZIP CODE)			
	AG		1965-04-07	Barcliff Hardin Kentucky	M		HHC, III Corps Fort Hood, TX 76544 (817)288-1111			
	AR		7 Apr 75				PHONE AND AUTO/DOVU NUMBER DSN 738-1111			
	AV									
	CA									
	CM		18. PERMANENT ADDRESS (Include ZIP Code)	19. CURRENT MAILING ADDRESS (If different from item 18) (Include ZIP Code)						
	EN		407 Keith Street Elizabethtown, KY 42701	419A Nicholson Road			EMAIL ADDRESS			
	FA			Fort Hood, TX 76544						
	RI									
	IN									
	MR									
	MP									
	OD									
	CM									
	SC									
	SS									
	TC									
	AN		1. NAME AND LOCATION OF EACH COLLEGE OR UNIVERSITY ATTENDED (Include USMA, USMA, USMA, USMA, and USMA)	(1) DEGREE	(2) SEMESTER	(3) YEARS ATTENDED	(4) DATE GRANTED OR WILL GRADUATE		(5) MAJOR SUBJECT	
	CH									
	DE		University of Maryland	BS	120	4	31	05	1999	
	JA		Central Texas College	AA	60	2			Business Mgmt Management	
	MC									
	MS									
	SP		21. CIVILIAN EDUCATION (See page 2 for additional requirements for professional personnel)							
	VC									
22. HIGHEST LEVEL SERVICE SCHOOL ATTENDED										
a. NAME OF SCHOOL					b. COURSE					
c. DATES (Mo/Yr)					d. COMPLETED					
FROM TO YES NO										
e. IF NOT COMPLETED GIVE REASON										
US Army Soldier Spt Center Ft. Jackson, SC					BNCOC 10 04 12 04 X					
23a. FOREIGN LANGUAGES AND DEGREE OF PROFICIENCY NA					b. ALAT SCORE (If applicable) NA					

DA FORM 61, JUN 81

EDITION OF 1 AUG 74 AND DA FORM 61, R. 26 SEP 75. PRIVACY ACT STATEMENT, ARE OBSOLETE.

USAPPC V2.00



ARMY STRONG.

WARRANT OFFICER STRONG.



DA Form 61 Cont.

34. APPLICANTS FOR JUDGE ADVOCATE GENERAL'S CORPS ONLY				35. APPLICANTS FOR CHAPLAINS BRANCH ONLY	
BARS OF WHICH YOU ARE A MEMBER (Specify date)				RELIGIOUS DENOMINATION BY WHICH YOU WILL BE ENDORSED	
36. APPLICANTS FOR MEDICAL AND DENTAL CORPS ONLY					
a. TRAINING		b. NAME AND LOCATION OF HOSPITAL		c. DATES (Month and Year) FROM _____ TO _____	
LEVEL	TYPE				
INTERNSHIP					
RESIDENCY TNG					
SPECIALTY TNG					
d. SPECIALTY BOARDS			e. DATES OF CERTIFICATION (Day, Month, Year)		
f. PLACE IN WHICH CURRENTLY LICENSED					
37. APPLICANTS FOR ARMY NURSE CORPS AND ARMY MEDICAL SPECIALIST CORPS ONLY					
a. NAME OF NURSING OR ACCREDITED PROFESSIONAL SCHOOL		b. LOCATION		c. STATE AND DATE OF INITIAL REGISTRATION (Day, Month, Year)	
FROM	TO				
d. POSTGRADUATE COURSES (Include courses at general hospitals, service schools, and short courses)					
(1) SUBJECT OR COURSE		(2) NAME AND LOCATION OF SCHOOL OR HOSPITAL	(3) GENERATOR CREDITS EARNED	(4) DATES OF ATTENDANCE (Month, Year) FROM _____ TO _____	
38. HAVE YOU BEEN EMPLOYED BY THE US ARMY AS A DIETITIAN, OCCUPATIONAL OR PHYSICAL THERAPIST? (If yes, give details)					
<input type="checkbox"/> YES <input type="checkbox"/> NO					
39. ARMY ROTC (To be completed only by prospective ROTC graduates applying for appointment in USAR or RA)					
SUCCESSFULLY COMPLETED AROTC PROGRAM AS FOLLOWS					
a. COURSE		DATES ATTENDED (Month and Year) FROM _____ TO _____	e. CAMP TRAINING		
a. BASIC		(1) INSTALLATION (Basic)	COMPLETION DATE (Month, Year) FROM _____ TO _____		
b. ADVANCED		(2) INSTALLATION (Advanced/Ranger)	COMPLETION DATE (Month, Year) FROM _____ TO _____		
40. MAIN CIVILIAN EMPLOYMENT					
a. NAME AND ADDRESS OF EMPLOYER		b. JOB TITLE	c. MONTH AND YEAR		
Kelly Temporary Services Grand Rapids, MI 49572		Secretary/Typing	FROM 0929 TO 0692		
b. PRINCIPAL DUTIES (Describe briefly)					
41. REMARKS (Experience, preferences and special abilities not shown elsewhere in this application. Those required to enter primary entry specialties, see Page 1-274A, AR 601-100; if more space is required, attach additional sheet)					
I certify that (Applicant's Name) successfully passed the APFT consisting of pushups, situps, and the two mile run with a score of _____ on _____. The verified height is _____ and verified weight is _____. (Applicant's Name) is within body fat standards according to AR 600-9.					
JOHN Q. DOE CPT, MI Commanding					
42. THE INFORMATION CONTAINED HEREIN IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF					
DATE Current Date	SIGNATURE OF APPLICANT Applicant's Signature Here				

WARRANT OFFICER STRONG.



ARMY STRONG



Letters of Recommendation



- **USAREC Form 1936 (Mandatory FY13) include WO POC info.**
- **Letters Must Not be Older than 12 Months**
- **If using former Commander - we recommend having current Commander review packet!** *(Only applicable if PCS occurred within 60 days)*
- **Letters of Recommendation required:**
 - **Company Commander or First Level of UCMJ Authority** *(Must have)*
 - **Battalion Commander or Second Level of UCMJ Authority** *(Must have)*
 - **Senior Warrant Officer Letter of Recommendation** *(CW3 to CW5 – Must Have)*
- **USAREC Form 1936 must be Digitally Signed and Their Unit, Email and Phone Number needs to be in the Bottom Narrative of the Form**
- Note: **If requesting an APFT Waiver, BN CDR LOR must state: "You are physically capable of completing the**



ARMY STRONG.



Letter of Recommendation

(USAREC Form 1936)



LETTER OF RECOMMENDATION (Warrant Officer Procurement Program)					
PRIVACY ACT STATEMENT					
AUTHORITY: Collection of this information is authorized by Title 10, USC, Sections 503, 505, 509, 3013, and 12102 and Executive Order 13397. PRINCIPAL PURPOSE: Information collected will be used by selection board members to determine qualifications of warrant officer candidates. ROUTINE USES: Blanket routine use disclosures as described in AR 340-21, The Army Privacy Program, paragraph 3-2. DISCLOSURE: Voluntary; however, failure to provide the information may delay or terminate the warrant officer candidate's application process.					
SECTION I - ADMINISTRATIVE DATA					
1. NAME (Last, first, middle initial): APPLICANT, Joe E.	2. SSN: 111-22-3344	3. RANK: SGT	4. DATE OF RANK: 01 SEPTEMBER 2002		
5. UNIT, ORGANIZATION, STATION, ZIP CODE OR APO, MAJOR COMMAND: C DET 1-1 INF BATTALION FT ATTERBURY, KY 40121 (CENTCOM)					
6. I am completing this form as the applicant's: <input checked="" type="checkbox"/> Senior Warrant Officer <input type="checkbox"/> Company Grade Officer <input type="checkbox"/> Field Grade Officer <input type="checkbox"/> Other _____ (Specify)					
7. I have known this applicant from 2004 12 (Year/Month)	to PRESENT (Year/ Month)	8. RELATIONSHIP TO APPLICANT (i.e., supervisor, interviewer) Interviewer			
SECTION II - NARRATIVE (Write a narrative explaining the applicant's leadership qualities, character, experience, and special expertise that uniquely qualify him or her to serve as a future warrant officer.)					
NARRATIVE: 1. Letters should be 3 to 5 paragraphs with specific, quantifiable comments about the service member's character and tactical and technical competence. 2. You may use information from the service member's entire record, including comments about schools completed, assignments, deployments, impact awards, achievements and accomplishments. 3. Generic flowery comments are not effective in communicating the service member's attributes to board members. If you can change the name of the person being recommended to someone else and the comments are not false, then the letter is probably too generic to communicate effectively to board members.					
EXAMPLE WRITE-UP: 1. It is my absolute privilege to recommend SGT Sample for entry into the Warrant Officer Procurement Program as a Human Resources Technician (420A). I have reviewed SGT Sample's credentials and found his records very worthy for warrant officer candidacy. As such, SGT Sample has earned my vote of confidence to compete for warrant officer selection. 2. SGT Sample served with me during a year-long deployment to Balad, Iraq 2004. During this time, I personally observed and worked with SGT Sample on several personnel support issues. My observation of him is that of an industrious Senior Personnel Sergeant fully capable of performing his administrative duties. SGT Sample worked tirelessly processing personnel actions for 849th Transportation Battalion, Ft Bragg NC. Those actions included; Joint Personnel Status Reporting (JPERSTAT), Casualty Operations, ID Tags, Fighter Management Pass Program (FMPP), legal processing and administrative advisor to both the Battalion and Company Commander. Without question, SGT Sample superbly performed AG Wartime Functions in accordance with FM 12-6. 3. SGT Sample possesses the qualities of a self-starter and a leader. His mastery of warrior tasks and drills led to his selection as NCO of the Quarter. Further, he mentored a subordinate to compete and win 1st TSC's Soldier of the Year competition. SGT Sample completed BNCOIC with a 97.4 GPA. He has received numerous valor and service awards; for technical merit including the prestigious Bronze Star. SGT Sample is active within the community and is not afraid to dialog regarding the issues of the day. He is a well-rounded, respected member of both the military and civilian community. 4. In conclusion, SGT Sample has a rare blend of technical and tactical proficiency as evident by his outstanding military career. For this reason, I gladly recommend him for acceptance into the Warrant Officer Corps as a Human Resources Technician (420A)APPLICANT					
SECTION III - DISCLAIMER					
Notice: I understand by submitting this recommendation I am endorsing this applicant to be boarded for warrant officer selection.					
SECTION IV - SIGNATURE					
1. NAME (Last, first, middle initial): DOE, John Q.	2. RANK: CW4	3. BRANCH: AG	4. SIGNATURE: _____ <td>5. DATE (YYYYMMDD): _____<td></td></td>	5. DATE (YYYYMMDD): _____ <td></td>	
INQ CONTROL FORM 1936, REV 1 THE INFORMATION CONTAINED HEREIN IS UNCLASSIFIED					V4700



ARMY STRONG.

WARRANT OFFICER STRONG.



Resume

(USAREC Form 1935)



WARRANT OFFICER RESUME (This form will be used in place of the resume.)			
PRIVACY ACT STATEMENT			
AUTHORITY: Collection of this information is authorized by Title 10, USC, Sections 503, 505, 508, 3013, and 12102 and Executive Order 9397. PRINCIPAL PURPOSE: Information collected will be used by selection board members to determine qualifications of warrant officer candidates. ROUTINE USES: Blanket routine use disclosures as described in AR 340-21, The Army Privacy Program, paragraph 3-2. DISCLOSURE: Voluntary; however, failure to provide the information may delay or terminate the warrant officer candidate's application process.			
SECTION I - ADMINISTRATIVE DATA			
1. NAME (Last, first, middle initial): SAMPLE, Joe E.	2. SSN: 111-22-3333	3. RANK/GRADE: SGT / E5	4. PMOS: 42A20P
5. UNIT, ORGANIZATION, STATION, ZIP CODE OR APO, MAJOR COMMAND: C DET 1-4 INT BATTALION, FT ATTERTBURY, KY 40121 (CENTCOM)	6. E-MAIL ADDRESS: Joe.e.sample@us.army.mil		
SECTION II - CIVILIAN EDUCATION <small>(Include the highest degree level, name of college, major field, and any other special recognition.)</small>			
BA Degree - Liberty University, (intended graduation May 2012), 108 credits completed, 3.2 GPA AA Degree - University of Phoenix, 1999 GPA 3.5, Dean's List			
SECTION III - OBJECTIVE <small>(List all of the warrant officer MOSs to include 4-digit code and official title you are applying for in order of preference.)</small>			
1. 153A - Rotary Wing Aviator 2. 420A - Human Resources Technician 3.			
SECTION IV - MILITARY EXPERIENCE <small>(List in order from most recent to earliest duty assignment or position. Be sure to mention any accomplishments, special recognition, or achievements that will illustrate to the board your potential for leadership as a warrant officer.)</small>			
1. DATES (YY/MM): July 07 to Present ORGANIZATION: 95th Special Troops Battalion, Ft Carson, CO	POSITION TITLE: PROMOTION SECTION NCOIC		
<small>DUTIES (list below to show significant contributions):</small> Accomplishments should appear in chronological order, by date, starting with the most current assignment. List ALL military assignments, especially those in an NCO position. Focus on quantifiable measurements of success that set you apart by the unique characteristics of each assigned position. Write in clear, concise, and complete sentences - not in fragments or bullet. List outstanding achievements and additional duties while in position. Spell out terms that apply to your assignment especially buzzwords in your MOS, e.g. Prescribed Load List (PLL). Avoid the use of jargon, slang, and other types of informal terms. Focus on measurements of success. NOT just a job description, but how well you performed the job. Use NCOER/evaluation bullet as a "reference only", not as the actual written entry for the resume. Mention if you exceeded standards on a significant inspection/evaluation or leadership school. List deployments or make a separate assignment entry if deployment for several months.			
2. DATES (YY/MM): June 05 to June 07 ORGANIZATION: HHC, IIId ACA, Ft Hood, TX	POSITION TITLE: PROMOTION SECTION NCOIC		
<small>DUTIES (list below to show significant contributions):</small> List service, impact, or achievement awards received during each assignment tenure. Significant contributions in major field training exercises, e.g. JMR, JROTC, NTC may be listed. List career enhancement events such as Soldier/NCO of the month/quarter boards as well as Audie Murphy and similar enlisted club inductions. Again, focus on measurements of success. NOT just a job description.			

HQ USAREC Form 1935, Rev 1 Dec 2008

PREVIOUS EDITIONS ARE OBSOLETE

V6.00

SECTION VII - SUMMARY			
<small>Write a paragraph or two explaining why you are fully qualified to perform the duties of a warrant officer in your field. This is a very important part of the resume. Make this as brief as possible but do not leave anything off in a reader. Include all of your significant accomplishments/achievements (below-the-zone promotions, impact awards, noteworthy distinctions, deployments, challenging assignments, unique skills in MOS, standards exceeded on a significant inspection/evaluation, etc.) mentioned earlier and explain how you are exceptionally qualified and have the leadership, management and technical/tactical skills needed to become a WO. Answer this question: What have you done or accomplished that sets you apart from your peers? (Additionally, aviator applicants should include why they want to be an Aviator.)</small>			
RESUMES WILL NOT BE PROCESSED WITHOUT THE APPLICANT'S SIGNATURE & DATE.			
<small>Other notes: No other resume formats are acceptable beyond USAREC Form 1935. Therefore, do not go through a big expense by having external parties professionally prepare your resume. Simply follow the aforementioned guidelines and prepare the form yourself. If you are non-Army, the resume takes on increased importance in conveying your qualifications to become an Army Warrant Officer. PureEdge Form package may be utilized by visiting any Army Recruiting Station; USAREC forms may be obtain at http://www.usarec.army.mil/im-formpub/Form.htm.</small>			
SECTION VIII - SIGNATURE			
1. NAME (Last, first, middle initial): SAMPLE, Joe E.	2. RANK: SGT/E-5	3. SIGNATURE:	4. DATE (YYYY/MM/DD):



ARMY STRONG.

WARRANT OFFICER STRONG.



Physical Cover Sheet / DA Form 2808



(Date)
MEMORANDUM FOR Commander, US Army Recruiting Command, ATTN: RCRO-SM, Fort Knox, KY 40121-2726

SUBJECT: Results of Medical Examination

The results of a commissioning/aviation physical are furnished for the following individual:

- a. _____ (Rank) _____ (Print or Type Last Name, First Name, MI)
- b. _____ (SSN)
- c. _____ (Link, Company, Duty Station)
- d. Physical Profile Code:

P	U	L	H	E	S

e. Height: _____ Weight: _____ Age: _____

f. Physical initiated on: _____ (Date)

g. Physical completed on: _____ (Date)

h. If Flight Physical, date approved from USAAMC: _____ Stamped: _____ (Applicant must include page one showing stamp from Ft Rucker) (IW, TA)

i. Individual _____ is Fully Qualified _____ is NOT Fully Qualified.

(Physician's Signature) _____

(Physician's Stamp) _____

NOTE:

- (1) 153A & 150A applicants must also include page one of DD Form 2808 with the applicable qualified stamp from USAAMC, Ft. Rucker, AL.
- (2) Any applicant applying for an APFT or medical waiver must include entire physical.

WARRANT OFFICER STRONG.

REPORT OF MEDICAL EXAMINATION		1. DATE OF EXAMINATION	2. SOCIAL SECURITY NUMBER
PRIVACY ACT STATEMENT			
AUTHORITY: 10 USC 804, 805, 807, 832, 978, 1201, 1202, and 4346; and E.O. 9397 PRINCIPAL PURPOSE(S): To obtain medical data for determination of medical fitness for enrollment, induction, appointment and retention for applicants and members of the Armed Forces. The information will also be used for medical boards and separation of Service Members from the Armed Forces. ROUTINE USE(S): None			
3. LAST NAME - FIRST NAME - MIDDLE NAME (SUFFIX)		4. HOME ADDRESS (Street, Apartment Number, City, State, and ZIP Code)	5. HOME TELEPHONE NUMBER (Include Area Code)
FT RUCKER , AL 36882			
6. GRADE W1		7. DATE OF BIRTH	8. AOE
			9. SEX
			10. RACE
11. TOTAL YEARS GOVERNMENT SERVICE		12. AGENCY (Non-Service Members Only)	13. ORGANIZATION UNIT AND UNI/CODE
14.a. RATING OR SPECIALTY (Aviators only)		b. TOTAL FLYING TIME	c. LAST SIX MONTHS
16.a. SERVICE <input checked="" type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Navy <input type="checkbox"/> Reserve <input type="checkbox"/> Marine Corp <input type="checkbox"/> National Guard <input type="checkbox"/> Air Force		b. COMPONENT <input checked="" type="checkbox"/> Active Duty <input type="checkbox"/> Commission <input type="checkbox"/> Medical Other (Specify) _____ <input type="checkbox"/> Retention <input type="checkbox"/> Retirement _____ <input type="checkbox"/> Service Academy <input type="checkbox"/> Flight <input type="checkbox"/> Separation <input type="checkbox"/> ROTC Scholarship Program	c. PURPOSE OF EXAMINATION <input type="checkbox"/> Enlistment <input type="checkbox"/> Medical Exam <input type="checkbox"/> Commission <input type="checkbox"/> Retirement _____ <input type="checkbox"/> Retention <input type="checkbox"/> Service Academy _____ <input type="checkbox"/> Separation <input type="checkbox"/> ROTC Scholarship Program
17. Head, face, neck, and scalp <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
18. Nose <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
19. Eyes <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
20. Mouth and throat <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
21. Lungs • General (int. and ext. canals/Auditory cavity under item 71) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
22. Heart (Perforation) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
23. Eyes • General (Visual acuity and refraction under items 61-63) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
24. Ophthalmoscope <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
25. Pupils (Equality and reaction) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
26. Ocular motility (Associated parallel movements, nystagmus) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
27. Vision (Haus, size, rhythm, sounds) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
28. Lungs and chest (include breasts) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
29. Vascular system (Varicosities, etc.) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
30. Anus and rectum <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
31. Abdomen and viscera (Include hernia) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
32. External genitalia <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
33. Upper extremities <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
34. Lower extremities <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
35. Feet (Size, shape) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
36. Spine, osseous, muscular <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
37. Adenopathy (body) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
38. Skin, lymphatic <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
39. Nervous system <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
40. Psychiatric (Spec) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
41. Infectious (Spec) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
42. Endocrine <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
43. DENTAL DEFECTS AND DISEASES (Please expand. Use dental form if complete dental or dental examination not done as per DA Form 2808) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
44. EYES (Continued) <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
45. CLASS 1 Flight Physical <input checked="" type="checkbox"/> (E) <input type="checkbox"/> (C) <input type="checkbox"/> (T) <input type="checkbox"/> (P) <input type="checkbox"/> (R) <input type="checkbox"/> (O) <input type="checkbox"/> (D) <input type="checkbox"/> (F) <input type="checkbox"/> (S) <input type="checkbox"/> (H) <input type="checkbox"/> (I) <input type="checkbox"/> (L) <input type="checkbox"/> (M) <input type="checkbox"/> (N) <input type="checkbox"/> (V) <input type="checkbox"/> (B) <input type="checkbox"/> (G) <input type="checkbox"/> (J) <input type="checkbox"/> (K) <input type="checkbox"/> (U) <input type="checkbox"/> (X) <input type="checkbox"/> (Y) <input type="checkbox"/> (Z)			
46. DEPT OF THE ARMY ARMY AEROMEDICAL CENTER 20-OCT-2015 A 0002772821 QUALIFIED CLASS 1W FLYING DUTY			
47. HQ USAREC Form 1932, 1 Jul 2005			
48. https://vfso.rucker.ameddc.army.mil/pls/aeidweb/aeidweb/f2808_print.s1?show_mode=STA... 1/6/2099			





Security Clearance / DA Form

160R

REPLY TO
ATTENTION OF

FOR OFFICIAL USE ONLY
DEPARTMENT OF THE ARMY
(UNIT ORGANIZATION ADDRESS)

(Office Symbol)

(Date)

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA,
Fort Knox, KY 40121-2725

SUBJECT: Security Clearance Verification for (Last Name, First Name, Middle Initial)

1. References:

a. AR 380-67, Personnel Security Program, 9 Sep 88.

2. (Rank, Last Name, First Name, Middle Name, Social Security Number) was granted (Type of security clearance for example TS/SCI) eligibility on (date clearance was granted) by the Army Central Clearance Facility (CCF). (Rank Last Name) had a PPR closed on (date investigation was closed)

3. The point of contact for this memorandum is (Your S2/ Security Manager's Name, Phone Number, and E-mail address).

S2/Security Manager's Signature block with Signature

FOR OFFICIAL USE ONLY
This document and personal information contained herein are protected by the Privacy Act of 1974, Section 5 U.S.C. sub 552a as amended.

APPLICATION FOR ACTIVE DUTY											
For use of this form, see AR 135-210; the proponent agency is DCS, G-1.											
DATA REQUIRED BY THE PRIVACY ACT OF 1974											
AUTHORITY:	Title 10 USC, 672(d), 10 USC 275.										
PRINCIPAL PURPOSE:	Used by Reserve Component soldiers to apply for active duty programs announced by HQDA. Application is reviewed to determine the member's eligibility for announced active duty requirements.										
ROUTINE USES:	To determine qualifications and make final selection of individuals applying for active duty. Also used to schedule medical examinations, security screening and to issue active duty orders.										
DISCLOSURE:	Disclosure of personal information is mandatory for soldiers applying for active duty programs announced by HQDA.										
SEE INSTRUCTIONS ON PAGE 3 BEFORE COMPLETING THIS FORM											
1. DATE	C. TO: Commander	U.S. ARMY RECRUITING COMMAND, FORT KNOX, KY 40121									
2. FROM (Last, First, MI)	DOE, JOHN A.										
3. BRANCH	Sa. MOS/AC	59. COMPONENT									
NA	35M130	RA									
4a. PERMANENT HOME ADDRESS (Include ZIP code) ENTER YOUR HOME OF RECORD	50. PHONE NO. (Include area code) (502)765-6868										
4b. TEMPORARY ADDRESS (Include ZIP code) 419A Nicholson Road Fort Hood, TX 76544 Or Deployment Address	7b. DURATION	7c. PHONE NO. (Include area code) (512)773-2527									
ITEM 8 IS TO BE COMPLETED ONLY BY PERSONNEL CURRENTLY SERVING ON ACTIVE DUTY IN A WARRANT OFFICER OR ENLISTED STATUS.											
8a. PRESENT ACTIVE DUTY GRADE	8b. ORGANIZATION AND STATION ASSIGNMENT										
E-6	HHC, III Corps, Fort Hood, TX 76544										
9. I hereby volunteer to enter on active duty, for the period indicated below, in my branch or any of the following branches that I may be qualified for, and if accepted for active duty in another branch, I request transfer to that branch. (Check as appropriate)											
<input checked="" type="checkbox"/> a. FOR A PERIOD OF 6 YEARS <input type="checkbox"/> b. FOR AN INDEFINITE PERIOD											
c. OTHER BRANCHES (List in order of preference)											
10. I understand that if accepted for active duty, I may be assigned to duty commands, including an overseas command, or to any Army-wide vacancy. However, I would like to be considered for one of the three duty assignments and areas of assignment listed below in the order of my choice.											
<table border="1"> <thead> <tr> <th>CHOICE NO. 1</th> <th>CHOICE NO. 2</th> <th>CHOICE NO. 3</th> </tr> </thead> <tbody> <tr> <td>a. DUTY ASSIGNMENT 351M</td> <td>351M</td> <td>351M</td> </tr> <tr> <td>b. AREA ASSIGNMENT Hawaii</td> <td>Fort Knox, KY</td> <td>Fort Meade, MD</td> </tr> </tbody> </table>			CHOICE NO. 1	CHOICE NO. 2	CHOICE NO. 3	a. DUTY ASSIGNMENT 351M	351M	351M	b. AREA ASSIGNMENT Hawaii	Fort Knox, KY	Fort Meade, MD
CHOICE NO. 1	CHOICE NO. 2	CHOICE NO. 3									
a. DUTY ASSIGNMENT 351M	351M	351M									
b. AREA ASSIGNMENT Hawaii	Fort Knox, KY	Fort Meade, MD									
11. If it is possible, I prefer to enter on active duty during one of the three periods indicated below in order of preference:											
<table border="1"> <thead> <tr> <th>PREFERENCE NO. 1 (Month and Year) ASAP</th> <th>PREFERENCE NO. 2 (Month and Year) ASAP</th> <th>PREFERENCE NO. 3 (Month and Year) ASAP</th> </tr> </thead> </table>			PREFERENCE NO. 1 (Month and Year) ASAP	PREFERENCE NO. 2 (Month and Year) ASAP	PREFERENCE NO. 3 (Month and Year) ASAP						
PREFERENCE NO. 1 (Month and Year) ASAP	PREFERENCE NO. 2 (Month and Year) ASAP	PREFERENCE NO. 3 (Month and Year) ASAP									
12. Upon receipt of active duty orders, I will require the time indicated below to settle my affairs for entry on active duty. (Check appropriate box)											
<input type="checkbox"/> 60 DAYS <input type="checkbox"/> 30 DAYS <input type="checkbox"/> 10 DAYS <input checked="" type="checkbox"/> AVAILABLE ON DATE OF RECEIPT OF ORDERS											
13. Please provide any other information you consider essential in making your assignment, i.e. enrolled in the Exceptional Family Member Program or Army Married Couples Program.											
14. SIGNATURE OF APPLICANT											
Applicant's Signature											

DA FORM 160-R, JUL 2010

PREVIOUS EDITIONS ARE OBSOLETE.

AFD PFT 1008

WARRANT OFFICER STRONG.



ARMY STRONG.



Prerequisite Waiver / Moral Waiver



DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY
40121-2725

SUBJECT: Request for Prerequisite Waiver

Mitigating circumstances:

1. (State the type of waiver you are requesting)
Example: (1) Request an age waiver
(2) Request an Active Federal Service Waiver
(3) Request a prerequisite waiver (state the prerequisite(s) you wish to waive).

2. Anyone can request a prerequisite, AFS or age waiver, but not everyone will get them. Approval is a decision made by the unit who feel the waiver should be approved. Please note that waivers are approved only in unusual circumstances. Prerequisite waivers requests that do not give adequate justification, i.e., unusual skills, unique talents, special circumstances, etc. will probably be disapproved. With AFS waivers (required if you have 12 or more years AFS) or age waivers (required if you will be 33 or older for aviators or 46 for technicians, by the convene date of the board) the same principle applies and requests must be fully justified. Adequate justification might be: unusual circumstances, deployed for past year and unable to submit a packet, unusual skills, or unique talents. Asking for these waivers just because they are a part of the application will not result in approval.

Notes:

- 1) A separate waiver request must be submitted for each MOS that applicant does not meet the entire prerequisites for. Waivers should include why you feel that you should be accepted in the MOS without meeting all the requirements. Include any civilian experience, training or assignments that are similar to MOS you wish to apply for.
- 2) Make your request sound valid - for instance, an applicant stating they couldn't apply for the last 12 years because they were deployed. That doesn't sound valid because no one has been away from their duty station continuously over the last 12 years. You would need to include why you couldn't or didn't apply in between deployments. Another example is a 13 year request stating "I've been deployed for the last year..." does not explain why you didn't apply in the years leading up to the deployment.
- 3) Waiver request will not appear before the selection board once approved. Please use as much space as required to give all the information. A short and simple approach may result in a denied request.
- 4) Writing skills count. A properly written request ultimately may effect the approval of the request. Board members may interpret poor English, grammar and typographical errors as a lack of concern, sincerity or attention to detail from the applicant.

USAREC FL 168-1, 1 Dec 2007

V1.00



DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY
40121-2725

SUBJECT: Request for Moral Waiver

1. Nature of offense: Do not just list Article 92, Article 32, etc. Must request a moral waiver for any infractions listed on your enlistment contract.

a. Date of offense: (Month and year)

b. Place of offense: (City and State)

c. Punishment imposed: (Fine amount, forfeiture amount, extra duty, letter of reprimand, etc.)

2. Mitigating circumstances:

*You will use this moral waiver request if you responded YES to block#26 on DA Form 61. If you responded NO, you do not need a moral waiver.

Moral waiver is not required for traffic fines of \$250 or less. Do NOT include court cost.

Mitigating circumstances surrounding the charge. Four points to address:

- (1) Explain the incident (what, where, when, how, etc..)
- (2) Accepting responsibility for your actions
- (3) The lessons learned
- (4) How you now contribute to your unit, community and military service.

Notes:

- 1.) A separate moral waiver request must be submitted for each offense.
- 2.) Moral waiver request should give all the information possible related to the incident. Half answers and undisclosed information can cause a delay in processing. In some cases, the request will be returned to USAREC with a request for more information from applicant.
- 3.) This waiver request will not go before the selection board once approved. Please use as much space as required to give all the information. A short and simple approach may cause a returned request.
- 4.) Writing skills count. A properly written request may effect the approval of the request. HRC may interpret poor English, grammar and typographical errors as a lack of concern, sincerity or attention to detail from the applicant.

Joe E. Sample
SGT/E-5
111-22-3333



ARMY STRONG.

WARRANT OFFICER STRONG.



APFT Waiver / Statement of Understanding



DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY
40121-2725

SUBJECT: Request for Army Physical Fitness Test Waiver

Mitigating circumstance:

1. State the type of profile to include your complete PULHES, the event(s) that you can no longer take, and what alternate event(s) you are allowed to take.
 2. Give a detailed explanation why you believe this exception to policy should be approved in your case. Give an explanation of events that led up to the injury and how it happened. Explain your future expectations of your physical condition (i.e. come off profile after rehab, re-enlist, etc...).
- NOTE: LEAVE PARAGRAPH 3 AS IS VERBATIM
3. I fully understand that applying for this waiver does not constitute an automatic approval. I further understand that I must be fully mission deployable in the Warrant Officer Specialty in which I am applying.

(SIGNATURE)
(FULL NAME)
(RANK)
(SSN)

Only Available for Soldiers Injured in Combat

USAREC FL 168-1, 1 Dec 2007

V1.00



REPLY TO
ATTENTION OF

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY
40121-2725

SUBJECT: Statement of Understanding

1. I understand that if I am appointed as a warrant officer in the U.S. Army Reserves with concurrent active duty, that this appointment is contingent upon technical and tactical certification by successful completion of the appropriate warrant officer basic course unless I have been precertified by the warrant officer military occupational specialty (WOMOS) proponent. I understand that my application packet, to include all enclosures, may be converted to an electronic file and made available for review by qualifying officials at WOMOS proponent schools, Headquarters, Department of the Army, and other locations in order to determine my qualifications and competitive standing for appointment as a warrant officer.

2. I further understand that if I am appointed as a warrant officer in the U.S. Army Reserves without concurrent active duty, that this appointment is contingent upon technical and tactical certification by successful completion of the appropriate warrant officer basic course within 2 years of appointment unless I have been precertified by the WOMOS proponent or unless extended by Headquarters, Department of the Army.

3. I also understand that if I am eliminated from or fail to successfully complete the technical and tactical certification as specified above, I may be subject to discharge under regulations in effect at that time from the U.S. Army Reserves.

Signature _____

First Name, Middle Initial, Last Name _____

Rank _____

Title or Position _____

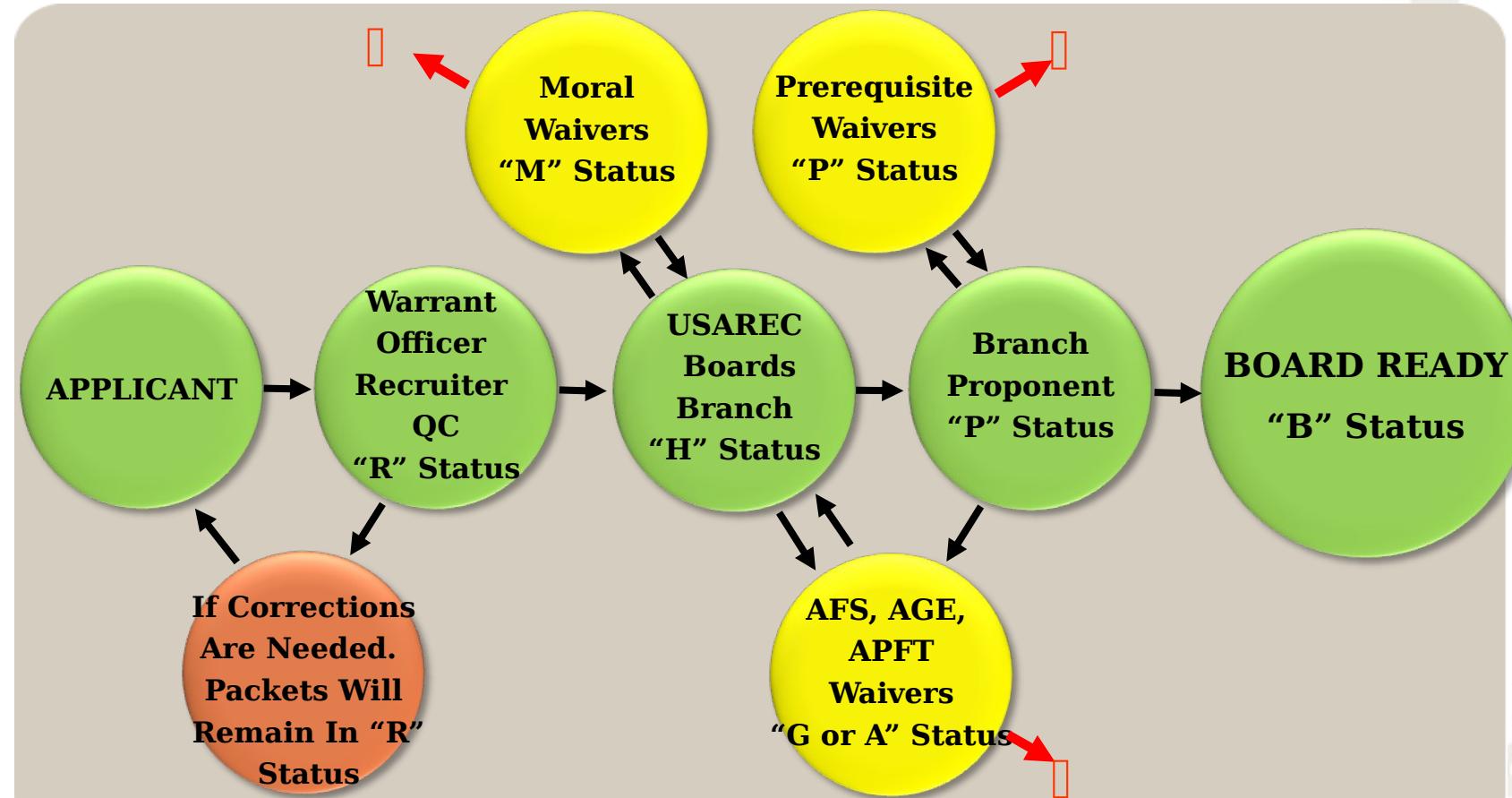


ARMY STRONG.

WARRANT OFFICER STRONG.



Application Process



WARRANT OFFICER STRONG.



ARMY STRONG.



Selection Board



- WO Packet Automatically Gets Two Looks
- Two Time Non-Select Must Wait a Year
- Board Results Released in MILPER message



Fully Qualified - Selected - Q-S



Fully Qualified - Nonselect (First Board) - FQ-NS



**Non Competitive - Nonselect (Second Board) - NC-
NS**

Applicants may immediately re-apply with a
waiver **WARRANT OFFICER STRONG.**



ARMY STRONG.



Warrant Officer Candidate School



- **Selectees will attend Warrant Officer Candidate School (WOCS)**
 - E5 graduated from PLDC/WLC, and E6 and above = 4 weeks and 4 days
 - E5 non-graduate from PLDC/WLC and all E1 to E4 = 6 weeks and 4 days

(Other services = 6 weeks and 4 days with exceptions)

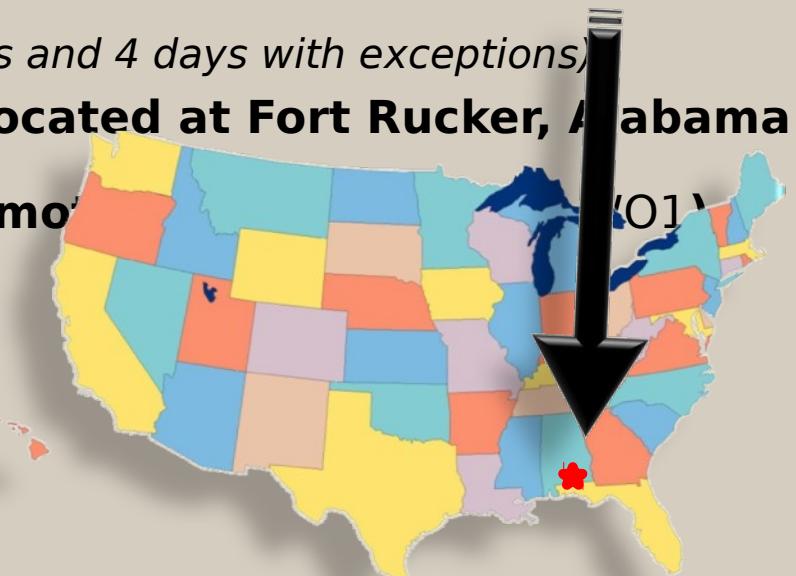
- WOCS and Flight School are located at Fort Rucker, Alabama

Skill Enhancement = Conditional Promotion

**Leadership Potential
Self Discipline
Attention to Detail
Time Management**

Leadership Communication Management Ethics

<http://usawocc.army.mil/>

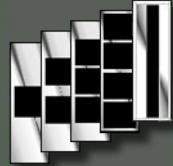


ARMY STRONG

WARRANT OFFICER STRONG.



A Day in the Life of a Candidate



0500 - Wake

0530 - First Formation

0530 - 0635 - PT

0635 - 0730 -

Hygiene 0815 - Breakfast

0815 - 1230 -

Academics 1330 -

Lunch 1720 -

Academics 1820 -

Adjudications 1900 -

Dinner



1900 - 2245 - Candidate Leadership Designs and Implements Schedule To Accomplish Specified Tasks

2245 - 0500 - Lights Out



ARMY STRONG.

WARRANT OFFICER STRONG.



Final Notes



- **Packet deadline:** Posted on website, generally two months prior to board week. (*Should be sooner if waivers are requested*)
- **Send your packet to USAREC “Electronically”** (Details on Website)
- **Remove Certificates when Emailing Packets** (Slows Processing)
- **Verify your application status on line!**
- **153A Applicants - Study for SIFT** (Selection Instrument for Flight Training)
- **QC your own packet** (S-1, WO, SR WO, CO Commander)
- **All the information you need is on our website.** (Research)
www.usarec.army.mil/warrant



ARMY STRONG.

WARRANT OFFICER STRONG.



Questions?

If you have
Suggestions, Questions, or Advice please e-mail
the Warrant Officer Recruiting Team
at

wo-team@usarec.army.mil

or visit our page on

[facebook](#) 



ARMY STRONG.

WARRANT OFFICER STRONG.